SCC eFile 2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION 213553425 COMMONWEALTH OF VIRGINIA							
1.) CORPORATION NAME:		DUE DATE: 11/30/2013					
Pan-American Life Insurance Company				502 57111	, •	0,2010	
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: NATIONAL CORPORATE RESEARCH, LTD.				SCC ID NO: F0009813			
250 BROWNS HILL COURT MIDLOTHIAN, VA				5.) STOCK	AU	THORIZED	
3.) CITY OR COUNTY OF V		CE:		COMMON	10,	000,000	
4.) STATE OR COUNTRY (OF INCORPORATION:						
6.) PRINCIPAL OFFICE AD	DRESS:						
	601 POYDRAS ST STE. 2600						
CITY/ST/ZIP:	NEW ORLEANS, LA	70130					
7.) DIRECTORS AND PRIN	CIPAL OFFICERS:	All directors an may be design	nd principa ated as b	al officers mus oth a director	t be liste and an	ed. An individual officer.	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO	JOSE S SUQUE P/CEO 601 POYDRAS O: NEW ORLEANS	ST	X OFF	ICER	X	DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO	RODOLFO J RE SR VP 601 POYDRAS O: NEW ORLEANS	ST	X OFF	ICER		DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO	PATRICK C FR/ SVP/GC/S 601 POYDRES O: NEW ORLEANS	ST	X OFF	ICER		DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO		ST, 28TH FLOOF	X OFF	ICER		DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO	CARLOS MICK CFO 601 POYDRAS O: NEW ORLEANS	ST	X OFF	ICER		DIRECTOR	
NAME: TITLE: ADDRESS: CITY/ST/ZIP/C	REDFIELD E. B DIRECTOR 601 POYDRAS Ste. 2800 O: NEW ORLEANS	ST.	OFF	ICER	X	DIRECTOR	

NAME: TITLE:	JOHN KELLY DIRECTOR	OFFICER	X DIRECTOR			
ADDRESS: CITY/ST/ZIP/CO:	601 POYDRAS ST. STE. 2800 NEW ORLEANS, LA 70130					
		OFFICER	χ DIRECTOR			
NAME: TITLE: ADDRESS:	KENNETH C. MLEKUSH DIRECTOR 601 POYDRAS ST.					
CITY/ST/ZIP/CO:	STE. 2800 NEW ORLEANS, LA 70130					
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CARLOS PALOMARES DIRECTOR 601 POYDRAS ST. NEW ORLEANS, LA 70130	OFFICER	X DIRECTOR			
NAME:	ROBERT L. PETTIT	OFFICER	X DIRECTOR			
TITLE: ADDRESS: CITY/ST/ZIP/CO:	DIRECTOR 601 POYDRAS ST. NEW ORLEANS, LA 70130					
		OFFICER	X DIRECTOR			
NAME: TITLE:	COLEMAN D. ROSS DIRECTOR					
ADDRESS: CITY/ST/ZIP/CO:	601 POYDRAS ST. NEW ORLEANS, LA 70130					
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSE A. VILLAMIL DIRECTOR 601 POYDRAS ST. NEW ORLEANS, LA 70130	OFFICER	X DIRECTOR			
NIANAT.		OFFICER	X DIRECTOR			
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK J. QUINLAN DIRECTOR 601 POYDRAS ST. NEW ORLEANS, LA 70130					
511 1/6 1/ <u>2</u> 11 /661	NEW ORLLAND, LA 70130	OFFICER	X DIRECTOR			
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WENDELL MOTTLEY DIRECTOR 601 POYDRAS ST. NEW ORLEANS, LA 70130					
NAME:	JERRY D. CARLISLE	OFFICER	X DIRECTOR			
TITLE: ADDRESS: CITY/ST/ZIP/CO:	DIRECTOR 601 POYDRAS ST. NEW ORLEANS, LA 70130					
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.						
/s/ PATRICK C FRAIZER PATRICK C FRAIZER, SVP/GC/S 11/5/2013						
SIGNATURE OF DIRECTOR/OFFICER PRINTED NAME AND CORPORATE DATE LISTED IN THIS REPORT TITLE						
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material						

respect with the intent that the document be delivered to the Commission for filing.